



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

ORLENE HAWKS
DIRECTOR

June 18, 2019

Mike Dykstra
Golden Life AFC, LLC
Ste 20
6159 28th St.
Grand Rapids, MI 49546

RE: Application #: AL590398548
Golden Life AFC #3
8675 S. Grow Road
Greenville, MI 48838

Dear Mr. Dykstra:

Attached is the Original Licensing Study Report for the above referenced facility. The study has determined substantial compliance with applicable licensing statutes and administrative rules. Therefore, a temporary license with a maximum capacity of 20 is issued.

Please review the enclosed documentation for accuracy and contact me with any questions. In the event that I am not available and you need to speak to someone immediately, please contact the local office at (517) 284-9720.

Sincerely,

A handwritten signature in cursive script that reads "Bridget Vermeesch".

Bridget Vermeesch, Licensing Consultant
Bureau of Community and Health Systems
1919 Parkland Drive
Mt. Pleasant, MI 48858-8010
(989) 948-0561

enclosure

**MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
BUREAU OF COMMUNITY AND HEALTH SYSTEMS
LICENSING STUDY REPORT**

I. IDENTIFYING INFORMATION

License #:	AL590398548
Applicant Name:	Golden Life AFC, LLC
Applicant Address:	Ste 20 6159 28th St. Grand Rapids, MI 49546
Applicant Telephone #:	(616) 307-7719
Administrator:	Joanne Wright
Licensee Designee:	Mike Dykstra
Name of Facility:	Golden Life AFC #3
Facility Address:	8675 S. Grow Road Greenville, MI 48838
Facility Telephone #:	(616) 307-7719 02/27/2019
Application Date:	
Capacity:	20
Program Type:	DEVELOPMENTALLY DISABLED MENTALLY ILL AGED

II. METHODOLOGY

12/20/2018	Inspection Completed-Fire Safety : A See AL590390752
01/19/2019	Inspection Completed-Env. Health : A See AL590390752
01/25/2019	SC-ORR Response Requested
01/25/2019	SC-ORR Response Received-Approval
02/27/2019	Enrollment Online enrollment
02/28/2019	Contact - Document Sent Act booklet
02/28/2019	Application Incomplete Letter Sent App - Section II; IRS ltr; 1326 for Mike; AFC 100 for Admin
03/01/2019	Contact - Document Received App - Corrected; IRS ltr; cl for Mike (LD); AFC 100 & Self-Cert Stmt for Administrator
04/01/2019	Application Incomplete Letter Sent
04/16/2019	SC-Application Received - Original
05/29/2019	Application Complete/On-site Needed
05/29/2019	Inspection Completed On-site
05/29/2019	Inspection Completed-BCAL Full Compliance Physical Plan Inspection, Review of resident files.

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

A. Physical Description of Facility

Golden Life AFC #3 is a single-story ranch style facility with a fully finished walk-out basement, located on nine acres, five miles from Greenville Michigan in Montcalm County. The main level of the home has five-bedrooms (all double occupancy), two full bathrooms (one bathroom with a bathtub and one with a walk-in shower) and one-half bathroom, dining room, living room and kitchen. The main level has three approved means of egress, with two of the exits being handicapped accessible and equipped with wheelchair ramps. The basement level has six bedrooms (four double occupancy and two single occupancy), dining area and three full bathrooms, (one bathroom with a walk-in shower and two with a bathtub). The basement is equipped with two exits that lead directly to cement sidewalks that meet at a cement pad at the driveway. Golden Life AFC #3 utilizes a private water supply and sewage disposal that has been inspected and approved by Mid-Michigan District Health Department on 01/09/2019.

Golden Life AFC #3 uses propane-forced air to heat the facility and the furnace is located in the basement along with the water heater. The room where the water heater and furnace are located is equipped with a 1 ¾ inch solid core door with an automatic self-closing device and positive latching hardware.

The facility is equipped with an interconnected, hardwired smoke detection system with battery back-up which is was installed by a licensed electrician and is fully operation. Smoke detectors have been installed near sleeping areas, on each occupied floor of the home, in the basement, and near all flame- or heat- producing equipment and the facility is fully sprinkled. The facility has been inspected on 12/20/2018 and was determined by the Bureau of Fire Services to be in full compliance with the applicable fire safety administrative rules.

Resident bedrooms were measured during the on-sire inspection and have the following dimensions:

Bedroom #	Room Dimensions	Total Square Footage	Total Resident Beds
1	11' 10" X 12' 5"	138.75 sq. ft.	2
2	13' 6" X 12	163.2 sq. ft	2
3	13' X 12'	156 sq. ft	2
4	13' X 12'	156 sq. ft	2
5	13' X 12'	156 sq. ft	2
6	15' 4" X 11'5"	177.1 sq. ft	2

7	15' 4" X 11' 5"	177.1 sq. ft	2
8	15' 4" X 11' 5"	177.1 sq. ft	2
9	15' 4" X 11' 5"	177.1 sq. ft	2
10	11' 5" X 11' 8"	135.7 sq. ft	1
11	15' X 9'	135 sq. ft	1

The indoor living and dining areas measure a total of 1297 square feet of living space. This exceeds the minimum of 35 square feet per occupant requirement.

Based on the above information, this facility can accommodate 20 residents. It is the licensee's responsibility not to exceed the facility's licensed capacity.

B. Program Description

The applicant, Golden Life AFC, LLC, intends to provide 24-hour supervision, protection and personal care to 20 male and/or female residents who are aged, mentally ill, and/or developmentally disabled. The program will include social interaction, training to develop personal hygiene, personal adjustment, public safety and independent living skills; opportunity for involvement in educational or day programs or employment and transportation. The applicant intends to accept referrals from Mi-Choice Waiver Programs, Community Mental Health agencies, and Veterans Administration or residents with private sources for payment.

If needed by residents, behavior interventions and specialized interventions will be identified in the assessment plans. These interventions shall be implemented only by staff trained in the intervention techniques.

In addition to the above program elements, it is the intent of the applicant to utilize local community resources for recreational activities including three outings a week that may include going to the movie theatres, the library, churches, shopping centers, or other community events. Lakeview Baptist Church will provide rides to residents who would like to attend their church. These resources provide an environment to enhance the quality of life and increase the independence of residents. Golden Life AFC #3 is about five miles from the city limits of Greenville. The facility also sits on nine acres with walking trails.

C. Applicant and administrator Qualifications

The applicant is, Golden Life AFC, L.L.C, a "For Profit Corporation", established in Michigan on 01/12/2018. The applicant submitted a financial statement and established an annual budget projecting expenses and income to demonstrate the financial capability to operate this adult foster care facility.

Golden Life AFC, L.L.C. is a single owned entity owned by Dom Groenveld, who has submitted documentation appointing Michael Dykstra as licensee designee for this facility and Joanne Wright as the administrator of the facility.

Criminal history background checks of the licensee designee and administrator, Michael Dykstra and Joanne Wright were completed, and they were determined to be of good moral character to provide licensed adult foster care. The licensee designee and administrator submitted statements from a physician documenting their good health and current negative tuberculosis test results.

Michael Dykstra and Joanne Wright have provided documentation to satisfy the qualifications and training requirements identified in the group home administrative rules. Mr. Dykstra has previously successfully owned and operated other AFC group facilities in which he provided direct care to individuals diagnosed with mental illness, developmental disabilities and/or those individuals who are aged and currently is the licensee designee at two other facilities. Ms. Wright is a Certified Nurse's Aide and has provided direct care for 17 years, in many different settings working with many different populations. Ms. Wright has been facility manager of an Adult Foster Care Home for over 16 months.

The staffing pattern for the original license of this 20-bed facility is adequate and includes a minimum of 3 staff for 20 residents per shift during the first and second shift. Then third shift will include a minimum of 2 staff for 20 residents. Mr. Dykstra and Ms. Wright acknowledged that the staff to resident ratio may need to be increased in order to provide the level of supervision or personal care required by the residents due to changes in their behavioral, physical, or medical needs. The Mr. Dykstra and Ms. Wright have indicated that direct care staff will be awake during sleeping hours.

The applicant acknowledged an understanding of the qualifications, suitability, and training requirements for direct care staff prior to each person working in the facility in that capacity or being considered as part of the staff to resident ratio.

The applicant acknowledged an understanding of the responsibility to assess the good moral character of employees. The applicant acknowledged the requirement for obtaining criminal record checks of employees and contractors who have regular, ongoing "direct access" to residents or resident information or both utilizing the Michigan Long Term Care Partnership website (www.miltcpartnership.org) and the related documents required to demonstrate compliance.

The applicant acknowledged an understanding of the administrative rules regarding medication procedures and assured that only those direct care staff that have received medication training and have been determined competent by the licensee designee will administer medication to residents. In addition, the applicant has indicated that resident medication will be stored in a locked cabinet and that daily medication logs will be maintained on each resident receiving medication.

The applicant acknowledged the responsibility to obtain all required good moral character, medical, and training documentation and signatures that are to be completed prior to each direct care staff or volunteer working directly with residents. In addition, the applicant acknowledged the responsibility to maintain all required documentation in each employee's record for each licensee or licensee designee, administrator, and direct care staff or volunteer and follow the retention schedule for those documents contained within each employee's record.

The applicant acknowledged an understanding of the administrative rules regarding the admission criteria and procedural requirements for accepting a resident into the adult foster care home.

The applicant acknowledged the responsibility to obtain the required written assessment plan, resident care agreement, and health care appraisal forms and signatures that are to be completed prior to, or at the time of, each resident's admission to the home as well as updating and completing those forms and obtaining new signatures for each resident on an annual basis.

The applicant acknowledged the responsibility to maintain a current resident record on file in the home for each resident and follow the retention schedule for all of the documents that are required to be maintained within each resident's file.

The applicant acknowledged an understanding of the administrative rules regarding the handling of resident funds and valuables and intends to comply. The applicant acknowledged that a separate *Resident Funds Part II BCAL-2319* form will be created for each resident in order to document the date and amount of the adult foster care service fee paid each month and all of the resident personal money transactions that have been agreed to be managed by the applicant.

The applicant acknowledged an understanding of the administrative rules requiring that each resident be informed of their resident rights and provided with a copy of those rights. The applicant indicated the intent to respect and safeguard these resident rights.

The applicant acknowledged an understanding of the administrative rules regarding the requirements for written and verbal reporting of incidents and accidents and the responsibility to conduct an immediate investigation of the cause.

The applicant acknowledged the responsibility to provide a written discharge notice to the appropriate parties when a 30-day or less than 30-day discharge is requested.

The applicant acknowledged that residents with mobility impairments may only reside on the main floor of the facility.

D. Rule/Statutory Violations

Compliance with the licensing act and administrative rules related to the physical plan has been determined. Compliance with the administrative rules related to the quality of care will be assessed during the temporary license period.

IV. RECOMMENDATION

I recommend issuance of a temporary license to this AFC adult large group home with a capacity of 20 residents.

Bridget Vermeesch

05/30/19

Bridget Vermeesch
Licensing Consultant

Date

Approved By:

Dawn Timm

06/18/2019

Dawn N. Timm
Area Manager

Date